POSITION	INITIALS	UD NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	30. E.	1200	4-6-00
FORMALITY REVIEW	W.N	711-20	1 2 7
RESPONSE FORMALITY REVIEW	M. M.	7112 25	7-74-00
			7 29-00

## INDEX OF CLAIMS

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			Final	
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7	57		107	+++++
8 9	58		108	<del>┾┼┼┼┼</del> ┼
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13	63	<del></del>	112	
14	64	<del>├┤┤</del> ┤┤	113	
15	65	<del>╏┋┋┋┋</del>	114	<del></del>
16	66		116	┝┼╀┼┼┼
17	67		117	┝ <del>┤</del> ╾┼╾┼╼┼╼┤
19	68		118	<del>╶┤╴┤╶┤╶</del> ┤
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23	72 73	<del></del>	122	
24	74	<del></del>	123	
25)	75	╼╂╼╂╼╂╼╂╼┨	124	
26	76	<del></del>	125	++++
28	77	<del>-++-</del> +-	127	
29	78		128	╼┾╼┼═┼
30	79		129	╅╅╇
31	80		130	<del></del>
32	82	++++	131	
33	83	<del></del>	132	
34	84	<del></del>	133	
35	85	<del></del>	134	<del>- - - - - </del>
36	86	<del></del>	136	<del></del>
	87		137	<del>╶├─├─┼</del> ┤
38 1	88		138	<del></del>
707/6 N	89		139	
41	90	<del>- - -</del>  - -	140	
<del></del>	91 92	<del></del>	141	
42 43	93	<del></del>	142	
44	94	<del>╎╸╎╸╎╸</del> ┤╸┤	143	
45	95	<del>╵╸</del> ┼╸┼╶┼╼┤╴╎	144	+- - - -
46	96	<del>╎╸╎╸╎╸┤╸</del> ┤╸┆	145	<del></del>
47	97	<del>╎╸┆╸╎╸╎</del> ╸┤╸╎	147	╁╼╁╼╁╼╁╼┤
49	98	<del>                                      </del>	148	╀┽┽┼┼┤
50	99		149	<del> - - - - -</del>
	100		150	

If more than 150 claims or 10 actions staple additional sheet here

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